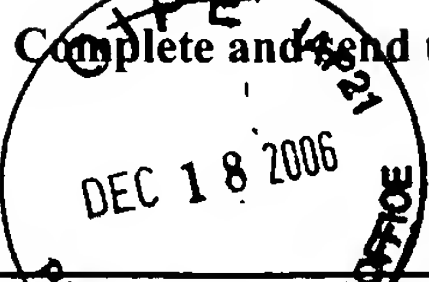


PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: **Mail** **Mail Stop ISSUE FEE**
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All future correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated on the label directed below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

26990 7590 09/18/2006

DAVID B. WALLER & ASSOCIATES
5677 OBERLIN DRIVE
SUITE 214
SAN DIEGO, CA 92121

12/19/2006 EAYALEW2 00000013 10623424

01 FC:2501 700.00 DP
 02 FC:1504 300.00 DP

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

DAVID B. WALLER	(Depositor's name)
<i>[Signature]</i>	(Signature)
12/19/06	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/623,424	07/18/2003	Robert J. Vidal	VER.001.P	4082

TITLE OF INVENTION: PROTECTIVE SHEILD FOR A TOOL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	12/18/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
WILLIAMS, JAMILA O	3722	408-00100R

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 DAVID B. WALLER & ASSOCIATES

2 N/A

3 N/A

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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Date _____

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Docket No.: VID.001.P
Express Mail No.:EV393145167US

ISSUE FEE PAYMENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Robert J. Vidal
Applicant No.: 10/623,424
Filed: July 18, 2003
Art Unit: 3722
Examiner: Williams, J.O.

Title: "A PROTECTIVE SHIELD FOR A TOOL"

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

Mail Stop: Issue Fee
Commissioner for Patents
U.S.P.T.O.
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

I hereby certify that the enclosures listed below are being deposited with the United States Postal Service "EXPRESS MAIL Post Office to Addressee" service under 37 C.F.R. § 1.10, Mailing Label Certificate No.: EV393145167US, on 18 December 2006, addressed to: Mail Stop: Issue Fee, Commissioner for Patents, U.S.P.T.O. Box 1450 Alexandria, VA 22313-1450.

Respectfully submitted,

David B. Waller
Patent Agent No.: 43,978

Enclosures:

Fee Transmittal, 1 page
Transmittal + Duplicate, 2 pages each
Check No.: 700 in the amount of \$1,000.00
Return Postcard



Docket No.: VID.001.P
Express Mail No.: EV393145167US

ISSUE FEE PAYMENT

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Mail Stop: Issue Fee
Commissioner for Patents
U.S.P.T.O.
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL FORM

Dear Sir:

Transmitted herewith for filing is the patent application entitled listed above from Inventor Robert J. Vidal. Enclosed are:

- ☒ Fee transmittal, 1 page
☐ A Declaration
☐ An Assignment
☐ A verified statement to establish small entity status under 37 C.F.R §1.9 and 37 C.F.R §1.27
☐ The additional claims fee has been calculated as shown below.
☒ Certificate of Mailing by "Express Mail"
☐ Information Disclosure Statement
☒ A return post card

For	No. Filed	No. Extra	Rate	Fee
Dependent Claims	0	0	0x \$25.00 =	\$ 0.00
Independent Claims	0	0	0x \$100.00 =	\$ 0.00
Multiple Dependent Claims	0	0	0x \$180.00 =	\$ 0.00
Assignment Fee			\$40.00	\$ 0.00
Issue Fee			\$700.00	\$1,000.00
Publication Fee			\$300.00	
TOTAL FEE:				\$1,000.00

- ☐ Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.

- ☐ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. _____.
- ☐ Any additional filing fees required under 37 C.F.R §1.16
- ☐ Any patent application processing fees under 37 C.F.R §1.17
- ☒ A check for the filing fee in the amount of one-thousand dollars (\$1,000.00) is enclosed, Check No.: 700

Respectfully submitted,



David B. Waller

Please send all correspondence to:

David B. Waller
5677 Oberlin Drive, Suite 214
San Diego, CA 92121
Phone: (858) 457-2014
Facsimile: (858) 457-2803
E-mail: dbwipmg@sbcglobal.net